PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003												Total State of the	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TO	TAL CLAIMS	70		4				RATE	FEE	7	RATE	· FEE ·	
FC	)R		NUMBER FILED		NUME	BER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	20 minus 20=		•	0		XS 9=	1	OR	X\$18=		
INC	EPENDENT C	LAIMS .				T		X43=	16	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	10	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	225	OR	TOTAL		
CLAIMS AS AMENDED - PART II									507	J .	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)								ENTITY	OR	SMALL		
AMENDMENT A	H-2200	CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	- <i>a</i>	0	= /		XS 9=		OR	X\$18=	·	
	Independent	. 3	Minus	••• E	3	= /		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JUIPLE DE	PENDENI	CLAIM		1	+195=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)		NDDIT. FEE	<u> </u>				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	,	HIĞHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**		=		XS 9=		OR	X\$18=		
	Independent	NITATION OF M	Minus	CNOCNIT	ĆI OIA	-		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
Z ŀ	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		8		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	•	8		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
.  If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
11	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT, FEE		
		ber Previously Paid					r foun	d in the ap	propriate box	in con	umn 1.		

Application or Docket Number